

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	71058	9-1-98
O.I.P.E. CLASSIFIER		18	9-3-98
FORMALITY REVIEW	My	70886	9-11-98

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	12 21 8 4 12 18 6
1	✓ ✓ ✓ ✓ ✓ ✓ ✓
2	✓ ✓ ✓ ✓ ✓ ✓ ✓
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Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)